



**NYAPRS 23rd Annual Legislative Day
Hart Auditorium, The Egg - Albany, NY
February 25, 2020**

**A04268 (Hevesi); S02659 (Savino)
Mandating Training of Some Direct Care Workers
in Adverse Childhood Experiences**

Purpose: To ensure that all direct-care domestic violence staff undertake consistent state-approved training in Adverse Childhood Experiences (ACEs) so that they are better prepared to provide services to clients.

Background: Adverse Childhood Experiences (ACEs) harm children's developing brains so profoundly that the effects show up decades later. Nearly 20 years ago, the CDC-Kaiser Permanente ACEs study showed that most people have at least one ACE and that people with four or more are likely to experience long-term and chronic health conditions. The CDCs-Kaiser study defined ACEs as: physical, emotional, and sexual abuse; physical and emotional neglect; parental mental illness, substance abuse, or incarceration; parental separation or divorce; and domestic violence.

Action: This measure would require the Office of Temporary and Disability Services (OTDA) and the Office of Children and Family Services (OCFS) to contract with an entity to develop and provide training for direct-care employees of domestic violence shelters, safe dwellings, and domestic violence programs since these programs are considered ideal places to pilot this training.

The state would also to contract with a certifying organization to provide a certification to each direct-care employee who satisfies the requirement of such training program; to require all direct-care employees of domestic violence shelters, safe dwellings, and domestic violence programs to participate in such training program; and to provide that such training shall be provided at no cost to employees.



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Make New York a Trauma-Informed State

The impact of trauma on behavioral health has become increasingly apparent in recent years with studies suggesting that over 90% of people with psychiatric diagnoses identify themselves as survivors of trauma. According to the World Health Organization (2019), Adverse Childhood Experiences (ACEs) cost the United States \$740 Billion a year in health care costs alone.

Unresolved trauma as a result of ACEs can negatively impact development across the life span and intergenerationally, contributing to substance misuse, child abuse, poverty, incarceration, relational disruptions, and diminished productivity in the workforce and in all aspects of an individual's life.

Survivors' attempts to cope with unresolved trauma may be misinterpreted by others as "non-compliance" and result in punitive service delivery responses that contribute to a revolving door of poor and inappropriate treatment, service refusal, costly repeat hospitalization, homelessness, incarceration, and missed opportunities to address the root causes of these issues. Moreover, the long-term consequences of dealing with racism, heterosexism, and homophobia contribute to trauma responses and negatively impact individuals and communities.

Increasingly, national efforts have attempted to change the narrative around trauma from one of negative outcomes based on past experiences to an opportunity to create positive outcomes through prevention, treatment, and outreach programs that are based on effective trauma-informed approaches, shifting the focus from illness to wellness –to hope, recovery, and resilience.

Executive Orders have been passed in Oklahoma, Oregon, Utah, Wisconsin, and Delaware, requiring state agencies to create trauma-responsive communities, organizations, and schools.

In 2018, Congressional bi-partisan support for the importance of trauma-informed care was recognized through the passage of U.S. HR 443/SR 346, 2018- a resolution which recognizes the importance, effectiveness, and need for trauma-informed care among existing programs and agencies at the Federal level and declaring May 22, 2018 as "National Trauma-Informed Awareness Day".

Help Make New York a Trauma-Informed State!

Ask your representative to sponsor a trauma roundtable with leading experts and policy makers to share evidence on policies that prevent and mitigate ACEs, and those that promote resilient communities. Declare May 22 National Trauma-informed Awareness Day in New York State.



National Coalition for Mental Health Recovery

MEMO OF SUPPORT

Resilience Investment, Support, and Expansion (RISE) from Trauma Act S.1770 (Sens. Durbin, Capito, Duckworth, Murkowski; Reps. Davis and Gallagher)

Designed to increase support for children who have been exposed to Adverse Childhood Experiences (ACEs) and trauma, such as witnessing violence, parental addiction, or abuse, the *Resilience Investment, Support, and Expansion (RISE) from Trauma Act* would help to build a trauma-informed workforce and increase resources for communities to support children who have experienced trauma.

Background: Nationwide, nearly 35 million children have had at least one traumatic experience, and more than two-thirds of children have been exposed to violence. Far too many children carry the emotional weight of community violence and other traumatic experiences, such as the daily stress of abuse or neglect at home, a parent battling addiction, or an incarceration or a deportation of a loved one.

Trauma can create stress on the developing brain and force children into constant “survival mode.” Decades of research have established the link between a child’s exposure to trauma and its effect on neurological and behavioral development. Left unaddressed, childhood trauma can impact mental and physical well-being.

The *RISE from Trauma Act* would expand and support the trauma-informed workforce in schools, health care settings, social services, first responders, and the justice system, and increase resources for communities to address the impact of trauma.

Specifically, the bill:

- Enhances federal training programs at the U.S. Department of Health and Human Services (HHS), the U.S. Department of Justice, and the U.S. Department of Education to provide more tools for early childhood clinicians, teachers, school leaders, first responders, and certain community leaders;
- Creates a new HHS grant program to support hospital-based trauma interventions, such as for patients who suffer violent injuries, in order to address mental health needs, prevent re-injury, and improve long-term outcomes;
- Creates a new HHS grant program to fund community-based coalitions that coordinate stakeholders to address trauma.

Action: Pass S.1770.

The National Coalition for Mental Health Recovery (NCMHR) brings together organizations and individuals who are dedicated to ensuring that people who are recovering or have recovered from a mental health condition have a major voice in the development and implementation of health care, mental health, and social policies at the state and national levels.

Contact us at info@ncmhr.org. Learn more about us at www.ncmhr.org



Leadership and Innovation in Turbulent Times

NYAPRS Virtual Executive Seminar Day 3 May 5, 2020

Register in advance for this webinar:

https://zoom.us/webinar/register/WN_Dos5qL8lQZqQH_JX7oucoQ

After registering, you will receive a confirmation email containing information about joining the webinar

11:45-1:00 pm Building a Trauma-Responsive Organization

Yves Ades, Ades Integrated Health Strategies

The prevalence of trauma in the lives of the people we serve is overwhelming. Trauma, and especially early childhood trauma, looms large in the histories of people with addiction disorders, complex behavioral conditions, and often, also in the histories of the people who serve them. Becoming a trauma responsive organization is essential for engaging survivors of trauma in treatment and retaining the talent we so desperately need in our workforce. Adopting the principles of trauma-informed care, providing safety for all, and preventing re-traumatization are key for supporting organizational health and achieving the best health outcomes for those who seek opportunity for healing. Come learn more about this essential initiative.